

New income guidelines are effective July 1, 2003. See the income table on the back page to learn why this is important to you.

Your continued health care coverage is as important to us as it is to you. Below are some tips to help you respond to our requests on time.

- Now that April 15 has passed, make an extra copy of your 2002 federal income tax form and all schedules filed with it.
- If you are in a partnership, or a shareholder in an S-Corporation, keep a copy of your business income tax return, including all schedules filed with it.
- Also, keep a copy of your Schedules K-1 if you received any.

BH will verify your income and eligibility at least once a year, and you will need to send the above listed forms to us when requested. You will also need to provide copies if your income or family size changes (for example, if you marry, divorce, add a child, or change jobs).

Figuring your monthly income

At least once a year, Basic Health (BH) will check your income to make sure you still qualify for the program. Your income is also used to determine how much you pay each month for BH coverage. To do this, we require current pay stubs and a copy of the most recent year's IRS Form 1040 with all tax schedules. We will look at the income from both sources, and use the one that gives us the most accurate picture of your income. If you do not work year-round, we would normally use your 1040 to find an average monthly income. If your job has changed since you filed your last 1040, we would use your current pay stubs. If you've had a change in circumstances, please include a note telling us which information is most accurate for your situation.

Providing false information

Whenever BH asks you for updated information or if your information changes, you must provide BH with correct information. You must not withhold information that you know must be reported to BH or provide false information on any BH documents. If we find that you withheld or gave false information on purpose, we can require you to re-pay up to twice the amount the state paid for your coverage. You can also be disenrolled from BH, prosecuted for perjury, and billed for any medical services you received through BH.

Basic Health *Plus* and Maternity Benefits Program guide

New this year, information on the Maternity Benefits Program and Basic Health *Plus* has been separated from the BH *Member Handbook* into its own guide. If you are enrolled in either of these programs, please refer to this guide for benefits questions. If you haven't received a copy of this guide, you can request one by calling 1-800-660-9840.



This serves as official notice of changes to your Basic Health coverage, and is an addendum to your *Member Handbook*.

To obtain this document in another format (such as Braille or audio), call our Americans with Disabilities Act (ADA) Coordinator at 360-923-2805. TTY users (deaf, hard of hearing, or speech impaired), call 360-923-2701 or toll-free 1-888-923-5622.

Si desea ayuda en español, llame al 1-800-321-0291. Для обслуживания на русском языке, позвоните, пожалуйста, по телефону 1-800-387-8224.
한국어로 도움을 원하시면 1-800-324-1658로 연락하십시오. Nếu quý vị muốn được giúp bằng tiếng Việt, xin gọi số 1-800-423-2231.

New income guidelines take effect with your July coverage.

Every spring, the federal government publishes new federal income guidelines that are the basis for determining Basic Health monthly premiums. Basic Health uses these guidelines when determining eligibility and your share of the monthly cost for Basic Health coverage.

As a result of this new scale, you may be able to earn slightly more income before you have to report an income change. For some families,

the revised income guidelines mean a lower monthly premium. Your enclosed billing statement for July coverage may show a different premium if your reported income now falls into a lower income band.

If your income or family size changes at any time, and affects the income band you fall within, you must let Basic Health know. Each month, the income we have on record for you is shown on your billing statement. Be sure to check

that information, and compare it to the income guidelines shown below to determine if you need to report an income change.

Reminder:

If you have questions on BH benefits or processes, such as recertification or recoupment, please refer to your BH *Member Handbook*.

Income Table							
Number of Persons in Family							Income Band
1	2	3	4	5	6	7	
\$0 - \$486.41	\$0 - \$656.49	\$0 - \$826.58	\$0 - \$996.66	\$0 - \$1,166.74	\$0 - \$1,336.83	\$0 - \$1,506.91	A
486.42 - 748.33	656.50 - 1,009.99	826.59 - 1,271.66	996.67 - 1,533.33	1,166.75 - 1,794.99	1,336.84 - 2,056.66	1,506.92 - 2,318.33	B
748.34 - 935.41	1,010.00 - 1,262.49	1,271.67 - 1,589.58	1,533.34 - 1,916.66	1,795.00 - 2,243.74	2,056.67 - 2,570.83	2,318.34 - 2,897.91	C
935.42 - 1,047.66	1,262.50 - 1,413.99	1,589.59 - 1,780.33	1,916.67 - 2,146.66	2,243.75 - 2,512.99	2,570.84 - 2,879.33	2,897.92 - 3,245.66	D
1,047.67 - 1,159.91	1,414.00 - 1,565.49	1,780.34 - 1,971.08	2,146.67 - 2,376.66	2,513.00 - 2,782.24	2,879.34 - 3,187.83	3,245.67 - 3,593.41	E
1,159.92 - 1,272.16	1,565.50 - 1,716.99	1,971.09 - 2,161.83	2,376.67 - 2,606.66	2,782.25 - 3,051.49	3,187.84 - 3,496.33	3,593.42 - 3,941.16	F
1,272.17 - 1,384.41	1,717.00 - 1,868.49	2,161.84 - 2,352.58	2,606.67 - 2,836.66	3,051.50 - 3,320.74	3,496.34 - 3,804.83	3,941.17 - 4,288.91	G
1,384.42 - 1,496.74	1,868.50 - 2,020.10	2,352.59 - 2,543.46	2,836.67 - 3,066.81	3,320.75 - 3,590.17	3,804.84 - 4,113.53	4,288.92 - 4,636.89	H